



Incident Organizer 2020

INCIDENT NAME	
INCIDENT NUMBER	
INCIDENT COMMANDER	
DATE & TIME	

Web Site Reference

Maps:



<https://www.frames.gov/partner-sites/fire-operations-maps/wyoming/>

Casper Interagency Dispatch Center:



https://gacc.nifc.gov/rmcc/dispatch_centers/r2cpc/index.htm

Weather:



<https://www.weather.gov/riw/fire>

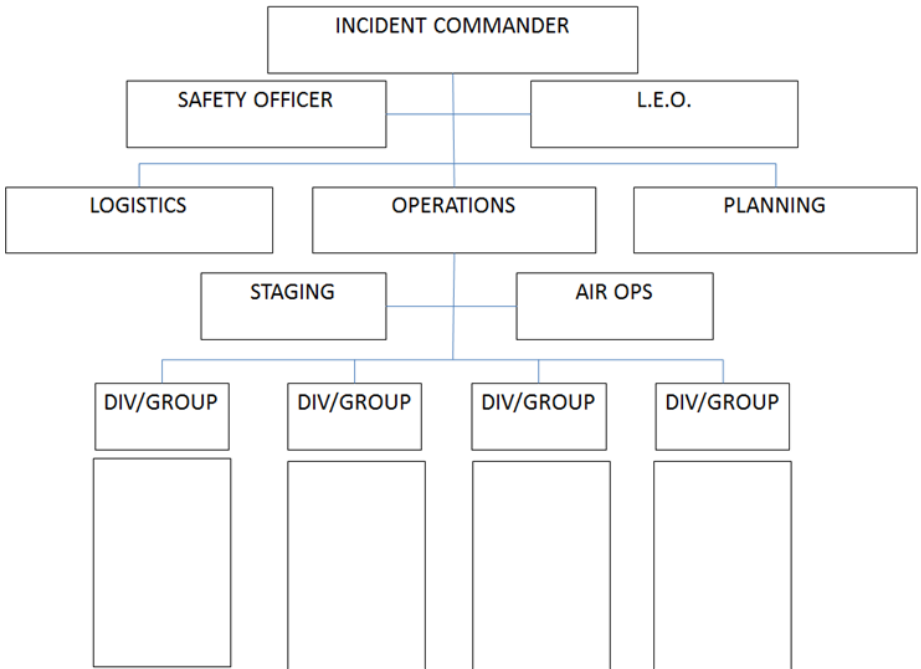
Initial Fire Size Up

Fire Name:				IA Number:	
MEDEVAC location:				Fire Code: (Provided by dispatch)	
IC Name:			Time:		Date:
IC Name:			Time:		
Descriptive Location:					Time:
Legal: T	R	Sec	¼	¼	IA Time:
In WGS 83 Format (Degrees, decimal Minutes) at Point of Origin					Elevation:
Latitude			Longitude		
Estimated Size (acres):			Ownership @ Origin:		
					Complexity:
Communications Plan					Reported By:
Comm:		Tac:		A/G:	
Cause (circle one): Lightning Human					Estimated Containment:
Unknown					
Fire Investigator: No Yes, on order Name:					Estimated Control:
Are any Structures/Values Threatened? No Yes – specify:					
Does the fire constitute any control problems? No Yes – specify:					
Hazard(s): Beetle Killed timber? 25% 50% 75%<					
Are additional resources needed? No Yes – specify:					
Resource Constraints:					
Spread Potential	1) Low 2) Moderate 3) High 4) Extreme				
Character of Fire:	1) Smoldering 2) Creeping 3) Running 4) Spotting 5) Torching 6) Crowning 7) Crown/Spotting 8) Erratic Flame Length (average flame length at head of fire): _____ feet				
Weather Conditions:	1) Clear 2) Scattered Clouds 3) Building Cumulus 4) T-Storms in the area 5) Lightning 6) Overcast 7) Intermittent Showers 8) Heavy Showers				
Slope:	1) 0 - 25% 2) 26 - 40% 3) 41 - 55% 4) 56 - 75% 5) 76 + %				
Aspect:	1) Flat 2) North 3) NE 4) East 5) SE 6) South 7) SW 8) West 9) NW 10) Ridge top				
Position on Slope:	1) Ridge top 2) Saddle 3) Upper 1/3 of Slope 4) Middle 1/3 of Slope 5) Lower 1/3 of Slope 6) Canyon Bottom 7) Valley Bottom 8) Mesa/Plateau 9) Flat or Rolling				
FBPS Fuel Type:	1) Short Grass (1 ft.) 2) Timber w/ Grass Understory 3) Tall Grass (2 ½ ft.) 4) Chaparral/Brush (6 ft.) 5) Brush (2 ft.) 6) Dormant Brush 7) Southern Rough 8) Closed Timber Litter 9) Hardwood Litter 10) Timber (Litter & Understory) 11) Light Logging Slash 12) Medium Logging Slash 13) Heavy Logging Slash 14) Debris Pile 15) Other(specify): _____				
Wind :	Direction: _____ Speed: _____ Gusts to: _____				
CALL INTO DISPATCH IMMEDIATELY! (Areas in RED are required for any ordered resources and Fire Code.)					

Re- source	ETA OR ON SCENE	Brief?	ON DUTY TIME	Assignment	Release Time
Resources exceeding 16 hours		Justification/Documentation			

MAP SKETCH

Organization



Incident Objectives

1. **SAFETY** of firefighters and public.

2.

3.

4.

Your goal is to manage the incident and not create another.

(Examples: protect structures, keep fire to east of road, river or ridge)

Initial Response Strategy (circle)

Full Suppression-Perimeter control

Point or Zone Protection-Contain

Monitor/Confine (Resource Benefits Fire or Multiple Management Objectives)

COMMUNICATION PLAN/FREQUENCIES

Net	RX	TX	Tone	Name
Command				
Support				
A/G				
Air-Air				
TAC				
TAC				

Risk Management

Maintain your situational awareness. Ensure compliance with the 10 Standard Fire-fighting Orders and LCES. Continually monitor the 18 Situations and apply appropriate mitigation. As the incident progresses, continually re-evaluate your situation. When hazards are identified mitigate them or change tactics and or strategy.

Refer to the green pages in the IRPG.

YES	NO	Decision Points
		Controls in place for identified hazardous actions or conditions? If no reassess your situation
		Are selected tactics based on expected fire behavior? If no reassess your situation
		Are the current strategy and tactics working? If no reassess your situation

Incident Risk Analysis (215a)

Division/Group or Segment	Hazardous Actions or Conditions	Mitigations/Warnings/Remedies
Operational Period		

Wildland Fire Risk and Complexity Assessment

Incident Commanders should complete Part A and Part B and relay this information to the Agency Administrator. If the fire exceeds initial attack or will be managed to accomplish resource management objectives, Incident Commanders should also complete Part C and provide the information to the Agency Administrator. Part A: Firefighter Safety Assessment.

Evaluate the following items, mitigate as necessary, and note any concerns, mitigations, or other information.

Incident Complexity Analysis (Type 4 or 5; Complete A & B)	
Part A: Firefighter Safety Assessment	Concerns, Mitigations, Notes
LCES	
Fire Orders and Watch Out Situations	
Multiple operational periods have occurred without achieving initial objectives	
Incident personnel are overextended mentally and/or physically and are affected by cumulative fatigue.	
Communication is ineffective with tactical resources and/or dispatch.	
Operations are at the limit of span of control.	
Aviation operations are complex and/or aviation oversight is lacking.	
Logistical support for the incident is inadequate or difficult.	

Part B: Relative Risk Assessment				
Values				Note/Mitigation
B1. Infrastructure/natural/cultural concerns- Considerations: key resources potentially affected by the fire such as urban interface, structures, critical municipal water-shed, commercial timber, developments, recreational facilities, power/pipelines, communication sites, highways, potential for evacuation, unique natural resources, designated areas (i.e. wilderness), T&E species habitat, and cultural sites.	L	M	H	
B2. Proximity and threat of fire to values- Evaluate the potential threat to values based on their proximity to the fire.	L	M	H	
B3. Social/economic concerns- Considerations: impacts to social or economic concerns of an individual, business, community or other stakeholder; degree of support for the wildland fire program and resulting fire effects; other fire management jurisdictions; tribal subsistence or gathering of natural resources; air quality regulatory requirements; public tolerance of smoke, including health impacts; potential for evacuation and ingress/egress routes; and restrictions and/or closures in effect or being considered.	L	M	H	
Hazards				Note/Mitigation
B4. Fuel conditions- Evaluate fuel conditions that exhibit high ROS and intensity for your area, such as those caused by invasive species or insect/disease outbreaks; and/or continuity of fuels.	L	M	H	

B5. Fire behavior - Considerations: intensity; rates of spread; crowning; profuse or long-range spotting.	L	M	H	
B6. Potential fire growth - Considerations: Considerations would include current and expected fire growth based on fire behavior analysis and the weather forecast and/or the ability to control the fire.	L	M	H	
Probability				Note/Mitigation
B7. Time of season - Considerations: time remaining until a season ending event.	L	M	H	
B8. Barriers to fire spread - Considerations: If many natural and/or human-made barriers are present, rank this element low. If some barriers are present, rank this element moderate. If no barriers are present, rank this element high.	L	M	H	
B9. Seasonal severity - Considerations: Fire danger indices such as energy release component (ERC); drought status; live and dead fuel moistures; fire danger indices; adjective fire danger rating; geographic area preparedness level.	L/ M	H	VH/ E	
<i>Enter the number of items circled for each column.</i>				

Relative Risk Rating (Circle one):

Low: Majority of items are "low", with a few items rated as "moderate" and/or "High".
Moderate: Majority of items are " Moderate" , with a few items rated as "Low" and/or "High".
High: Majority of items are " High" , A few items may be rated as "Low" or "Moderate".

Incident Complexity Analysis (Must be completed for Type 1. 2 & 3)					
Part C: Organization					
Relative Risk Rating (From Part B)					
Circle the Relative Risk Rating (from Part B)		L	M	H	Note/Mitigation
Implementation Difficulty					
C1. Potential fire duration - Evaluate the estimated length of time that the fire may continue to burn if no action is taken and amount of season remaining	N/A Very Short	L Short	M	H Long	
C2. Incident strategies (Course of action) - Consider the likelihood that those resources will be effective; exposure of firefighters; reliance on air-craft to accomplish objectives; and whether there are clearly defined trigger points.	Very Low	L	M	H	
C3. Functional concerns - Evaluate the need to increase organizational structure to adequately and safely manage the incident.	Very Low	L	M	H	
Socio/Political Concerns					Note/Mitigation
C4. Objective concerns - Considerations: clarity; ability of current organization to accomplish; disagreement among cooperators; tactical/operational restrictions; complex objectives involving multiple focuses; objectives influenced by serious accidents or fatalities.	Very Low	L	M	H	

C5. External influences - Considerations: limited local resources available for initial attack; increasing media involvement, social/print/television media interest; controversial fire policy; threat to safety of visitors from fire and related operations; restrictions and/or closures in effect or being considered; pre-existing controversies/relationships; smoke management problems; sensitive political concerns/interests.	N/A	L	M	H	
C6. Ownership concerns - Considerations: disagreements over policy, responsibility, and/or management response; fire burning or threatening more than one jurisdiction; potential for unified command; different or conflicting management objectives; potential for claims (damages); disputes over suppression responsibility.	N/A	L	M	H	
Enter the number of items circled for each column.					

Recommended Organization (circle one):

Type 5: Majority of items rated as “N/A”, a few items may be rated in other categories
Type 4: Majority of items rated as “Low”, with some items rated as “N/A”, and a few items rated as “Moderate” or “High”
Type 3: Majority of items rated as “Moderate”, with a few items rated in other categories
Type 2: Majority of items rated as “Moderate”, with a few items rated as “High”
Type 1: Majority of items rated as “High”, a few items may be rated in other categories

See IRPG Pg. 10-11 for Indicators of Incident Complexity for more detailed information

IC Signature: _____

Printed Name of IC: _____

Date: _____

SPOT WEATHER OBSERVATION AND FORECAST REQUEST									
Requesting Agency will Furnish Information for Blocks 1-12									
1. Incident or Project		2. Control Agency			3. Request Made				
					Time:			Date:	
4. Location (Designate Township, Range and Section (& ¼ section)):					5. Drainage Name:			6. Exposure/Aspect:	
7. Size of Incident or Project		8. Elevation			9. Fuel Type			10. Project On:	
Acres		Top		Bottom					<input type="checkbox"/> Ground <input type="checkbox"/> Crowning
11. Weather Conditions at Incident or Project or from RAWS:									
Place taken on fire	Elev	Observation Time	Wind Direction/Velocity		Temperature		No entry necessary: To be completed by the Fire Weather Forecaster.		Remarks
			20-Foot	Eye Level	Dry Bulb	Wet Bulb	RH	DP	
12. Send Forecast To (Person):		Send Forecast To (Location):			Send Forecast Via:			Send Copy To:	
								RSFO Fax 307-352-0218	
The Fire Weather Forecaster will Furnish the Information for Block 13:									
13. Discussion & Outlook: Date & Time:									
Burn Period	Sky Cover	Temperature	Humidity	Wind		Indices			
				Ridge Top	20-Foot				
<input type="checkbox"/> Today (sunrise to dusk) <input type="checkbox"/> This Afternoon (noon to dusk) <input type="checkbox"/> This Evening (1600 to dusk) <input type="checkbox"/> Tonight (sunset to sunrise)	<input type="checkbox"/> Mostly Sunny <input type="checkbox"/> Clear <input type="checkbox"/> Fair <input type="checkbox"/> Partly Cloudy <input type="checkbox"/> Mostly Cloudy <input type="checkbox"/> Cloudy <input type="checkbox"/> Variable	°F _____ <input type="checkbox"/> Max <input type="checkbox"/> Min <input type="checkbox"/> Range	_____% <input type="checkbox"/> Max. <input type="checkbox"/> Min. <input type="checkbox"/> Range	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction _____ Vel. _____ mph Gusts _____ mph	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction _____ Vel. _____ mph Gusts _____ mph	Haines: LAL: BI: CI: CWR:			
<input type="checkbox"/> Today (sunrise to dusk) <input type="checkbox"/> This Afternoon (noon to dusk) <input type="checkbox"/> This Evening (1600 to dusk) <input type="checkbox"/> Tonight (sunset to sunrise)	<input type="checkbox"/> Mostly Sunny <input type="checkbox"/> Clear <input type="checkbox"/> Fair <input type="checkbox"/> Partly Cloudy <input type="checkbox"/> Mostly Cloudy <input type="checkbox"/> Cloudy <input type="checkbox"/> Variable	°F _____ <input type="checkbox"/> Max <input type="checkbox"/> Min <input type="checkbox"/> Range	_____% <input type="checkbox"/> Max. <input type="checkbox"/> Min. <input type="checkbox"/> Range	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction _____ Vel. _____ mph Gusts _____ mph	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction _____ Vel. _____ mph Gusts _____ mph	Haines: LAL: BI: CI: CWR:			
Outlook for (Date): _____	<input type="checkbox"/> Mostly Sunny <input type="checkbox"/> Clear <input type="checkbox"/> Fair <input type="checkbox"/> Partly Cloudy <input type="checkbox"/> Mostly Cloudy <input type="checkbox"/> Cloudy <input type="checkbox"/> Variable	°F _____ <input type="checkbox"/> Max <input type="checkbox"/> Min <input type="checkbox"/> Range	_____% <input type="checkbox"/> Max. <input type="checkbox"/> Min. <input type="checkbox"/> Range	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction _____ Vel. _____ mph Gusts _____ mph	<input type="checkbox"/> Upslope <input type="checkbox"/> Downslope Direction _____ Vel. _____ mph Gusts _____ mph	Haines: LAL: BI: CI:			
Name of Fire Weather Forecaster:				Fire Weather Office Issuing Forecast:					
14. Forecast Received By (Name):				Date:		Time		Forecast Received at (Location) Via:	

MEDICAL PLAN (ICS 206 WF)

Controlled Unclassified Information//Basic

Medical Incident Report					
FOR A NON-EMERGENCY INCIDENT, WORK THROUGH CHAIN OF COMMAND TO REPORT AND TRANSPORT INJURED PERSONNEL AS NECESSARY.					
FOR A MEDICAL EMERGENCY: IDENTIFY ON SCENE INCIDENT COMMANDER BY NAME AND POSITION AND ANNOUNCE "MEDICAL EMERGENCY" TO INITIATE RESPONSE FROM IMT COMMUNICATIONS/DISPATCH.					
Use the following items to communicate situation to communications/dispatch.					
1. CONTACT COMMUNICATIONS / DISPATCH (Verify correct frequency prior to starting report) Ex: "Communications, Div. Alpha. Stand-by for Emergency Traffic."					
2. INCIDENT STATUS: Provide incident summary (including number of patients) and command structure. Ex: "Communications, I have a Red priority patient, unconscious, struck by a falling tree. Requesting air ambulance to Forest Road 1 at (Lat./Long.) This will be the Trout Meadow Medical, IC is TFLD Jones. EMT Smith is providing medical care."					
Severity of Emergency / Transport Priority	<input type="checkbox"/> RED / PRIORITY 1 Life or limb threatening injury or illness. Evacuation need is IMMEDIATE Ex: Unconscious, difficulty breathing, bleeding severely, 2 nd - 3 rd burns more than 4 palm sizes, heat stroke, disoriented. <input type="checkbox"/> YELLOW / PRIORITY 2 Serious injury or illness. Evacuation may be DELAYED if necessary. Ex: Significant trauma, unable to walk, 2 nd - 3 rd burns not more than 1-3 palm sizes. <input type="checkbox"/> GREEN / PRIORITY 3 Minor injury or illness. Non-Emergency transport Ex: Sprains, strains, minor heat-related illness.				
Nature of Injury or Illness & Mechanism of Injury	Brief Summary of Injury or Illness (Ex: Unconscious, Struck by Falling Tree)				
Transport Request	Air Ambulance / Short Haul/Hoist Ground Ambulance / Other				
Patient Location	Descriptive Location & Lat. / Long. (WGS84)				
Incident Name	Geographic Name + "Medical" (Ex: Trout Meadow Medical)				
On-Scene Incident Commander	Name of on-scene IC of Incident within an Incident (Ex: TFLD Jones)				
Patient Care	Name of Care Provider (Ex: EMT Smith)				
3. INITIAL PATIENT ASSESSMENT: Complete this section for each patient as applicable (start with the most severe patient)					
Patient Assessment: See IRPG page 106					
Treatment:					
4. TRANSPORT PLAN:					
Evacuation Location (if different): (Descriptive Location (drop point, intersection, etc.) or Lat. / Long.) Patient's ETA to Evacuation Location:					
Helispot / Extraction Site Size and Hazards:					
5. ADDITIONAL RESOURCES / EQUIPMENT NEEDS:					
Example: Paramedic/EMT, Crews, Immobilization Devices, AED, Oxygen, Trauma Bag, IV/Fluid(s), Splints, Rope rescue, Wheeled litter, HAZMAT, Extrication					
6. COMMUNICATIONS: Identify State Air/Ground EMS Frequencies and Hospital Contacts as applicable					
Function	Channel Name/Number	Receive (RX)	Tone/NAC *	Transmit (TX)	Tone/NAC *
COMMAND					
AIR-TO-GRND					
TACTICAL					
7. CONTINGENCY: Considerations: If primary options fail, what actions can be implemented in conjunction with primary evacuation method? Be thinking ahead.					
8. ADDITIONAL INFORMATION: Updates/Changes, etc.					
REMEMBER: Confirm ETA's of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively.					

After Action Review		
Incident Name:		IC:
Date:	Incident Complexity:	
Critiqued By: (Names of attendees)		
What was planned?		
What actually happened?		
What was the difference, if any between questions one and two?		
What can be done different next time to meet objectives?		
AAR Leader Signature:		Date:
Reviewed By:		Date:

SUMMARY OF ACTIONS (ICS 214)

[illegible]